

**2014 Statewide Medical and Health Functional Exercise**  
 Los Angeles County Exercise Objectives and Tasks Worksheet

**Agency/Organization:** \_\_\_\_\_

<p><b>Objective 1:</b>   <b>EM.02.02.01</b>   <b>Communications</b></p>	<p>Exercise communications PROCESS internally and externally in accordance with local policies and procedures within the exercise timeframe.</p>	<p><b>Sectors using this objective:</b>          Emergency Management, MHOAC, LEMSA, Fire, Ambulance, Hospitals, Community Health Centers, Long Term Care, Public Health, Mental Health, Ambulatory Surgery Centers, Home Health, Hospice, Dialysis.  <b>Sectors NOT using this objective:</b></p>
<p><b>Objective 2:</b>   <b>EM.02.02.01</b>   <b>Communications</b></p>	<p>Test REDUNDANT communications modalities within and across response partners in accordance with local policies and procedures.</p>	<p><b>Sectors using this objective:</b>          Emergency Management, MHOAC, LEMSA, Fire, Ambulance, Hospitals, Community Health Centers, Long Term Care, Public Health, Mental Health, Ambulatory Surgery Centers, Home Health, Hospice, Dialysis.  <b>Sectors NOT using this objective:</b></p>
<p align="center"><b>Objective Comments</b></p>		
<p>This section addresses the communication process both internally and externally, and the use of redundant communication modalities. These communication processes may include evaluating policies and procedures in communications utilizing systems such as CAHAN, ReddiNet, WebEOC, LiveProcess, EMResources, CommandAware, OARS, or other communication systems, email, phone, ham radio, etc. A continuous flow of critical information is maintained as needed among multi-jurisdictional and multi-disciplinary emergency responders, command posts, agencies, and the governmental officials for the duration of the emergency response operation in compliance with National Incident Management System / SEMS.</p>		
<p><b>Capability</b></p>	<p>Operational Communications (Formerly Communications)</p>	
<p><b>Activity</b></p>	<p>Provide Command Center Communications Support</p>	
<p><b>Task</b></p>	<p><b>Description</b></p>	
<p>ComC 4.2</p>	<p>Implement response communications interoperability plans and</p>	

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	protocols	
ComC 4.2.1	Communicate internal incident response information	
Res.B1a 4.2.1	Establish communications with emergency operations center/multi-agency coordination center (EOC/MACC)	
Res.B1c 5.1	Make proper connections with other agencies involved in incident	
Res.B1c 5.2.3	Coordinate with non-government agencies and/or private sector to collect/share data on incident situation	

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<b>Objective 3:</b>	Exercise the activation of medical and health partners surge plans.	<u><b>Sectors using this objective:</b></u> Emergency Management, MHOAC, LEMSA, Fire, Ambulance, Hospitals, Community Health Centers, Long Term Care, Public Health, Mental Health, Ambulatory Surgery Centers, Home Health, Hospice, Dialysis. <u><b>Sectors NOT using this objective:</b></u>
<b>Objective Comments</b>		
This section includes evaluating the organization's medical surge plans, and specialty surge		
<b>Capability</b>	Public Health and Medical Services (Formerly Medical Surge)	
<b>Activity</b>	Direct and coordinate medical surge operations	
<b>Task</b>	<b>Description</b>	
Res.B1d 3.1.2	Make a determination regarding the need for additional external resources and the implementation of a critical resource logistics and distribution plan	
ResC1b 3.4.1	Execute medical surge mutual aid agreements	
Res.B1d 3.2.2	Identify existing internal, jurisdiction-specific resources available to support response and recovery operations	
Pro.A2a 1.1.4	Implement surge capacity plans to increase Critical Infrastructure Protection (CIP) capacity during a crisis.	
ResC1b 4.5.1	Monitor bed census and activate management procedures	For Community Health Centers: Monitor facility status and activate management procedures.
Res.C1b 4.6	Activate medical surge plans, procedures, and protocols to ensure medical treatment for populations requiring specialized assistance	
<b>Activity</b>	Direct and coordinate mental health surge operations	

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<p><b>Objective 4:</b> EM.02.02.07  Staff Responsibilities</p>	<p>Activate the Incident Command System (ICS) system in response to an emerging infectious disease.</p>	<p><b><u>Sectors using this objective:</u></b> Emergency Management, MHOAC, LEMSA, Hospitals, Community Health Centers, Long Term Care, Public Health, Mental Health, Dialysis. <b><u>Sectors NOT using this objective:</u></b> Fire, Ambulance, Ambulatory Surgery Centers, Home Health, Hospice</p>
<p><b>Objective 5:</b> EM.02.02.01  Communications</p>	<p>Develop an Incident Action Plan (IAP) and conduct associated briefings within the locally determined parameters and timeframes established for the exercise.</p> <p>Note: Recommended that initial IAP is already developed and that a second IAP be created during the exercise.</p>	<p><b><u>Sectors using this objective:</u></b> Emergency Management, MHOAC, LEMSA, Hospitals, Community Health Centers, Long Term Care, Public Health, Mental Health, Dialysis. <b><u>Sectors NOT using this objective:</u></b> Fire, Ambulance, Ambulatory Surgery Centers, Home Health, Hospice</p>
<p><b>Objective 6:</b> EM.02.02.01  Communications</p>	<p>Medical and Health partners provide situation information as requested by the MHOAC Program for situation reporting.</p>	<p><b><u>Sectors using this objective:</u></b> Emergency Management, MHOAC, LEMSA, Fire, Ambulance, Hospitals, Community Health Centers, Long Term Care, Public Health, Mental Health, Dialysis. <b><u>Sectors NOT using this objective:</u></b> Ambulatory Surgery Centers, Home Health, Hospice</p>
<p><b>Objective 7:</b> EM.02.02.01  Communications</p>	<p>Exercise the completion and submission of Medical and Health Situation Report by the MHOAC Program utilizing the California Public Health and Medical Emergency Operations Manual (EOM) format and process. Use LA County form.</p>	<p><b><u>Sectors using this objective:</u></b> MHOAC <b><u>Sectors NOT using this objective:</u></b> Emergency Management, LEMSA, Fire, Ambulance, Hospitals, Community Health Centers, Long Term Care, Public Health, Mental Health, Ambulatory Surgery Centers, Home Health, Hospice, Dialysis.</p>
<p><b>Objective Comments</b></p>		
<p>This section looks at incident management from the on-site location to the command centers across the state at the various levels. Examples include Medical and Health Coordination Center (MHCC),</p>		

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Emergency Operations Centers (EOC), Hospital Command Centers (HCC), Department Operations Centers (DOC), Nursing Home Command Center (NHCC), MHOAC Program etc. and sharing situational information.		
<b>Capability</b>	Operational Coordination (Formerly Emergency Operations Center Management) and On-Site Incident Management	
<b>Activity</b>	Incident Command System Activation	
<b>Task</b>	<b>Description</b>	
Res.B1a 4.2	Initiate and implement the Incident Command System	
Res.B1a 5.1.2	Establish the command structure to manage the incident and meet objectives	
Res.B1a 5.1.3	Establish branches, groups, and divisions needed to manage the incident and meet incident objectives, strategies, and tactics	
Res.B1a 5.3.2	Transition from Incident Command to Unified Command for incidents involving multiple jurisdictions, a single jurisdiction with multi-agency involvement, or to Area Command with multiple jurisdictions and/or incidents with multi-agency involvement	
Res.B1c 5.2.4	Make appropriate notifications	
<b>Activity</b>	Develop incident action plan (IAP).	
<b>Task</b>	<b>Description</b>	
Res.B1a 6.1	Establish incident objectives, priorities, and operational periods	
ResB1a 6.2	Develop the incident action plan (IAP) to establish priorities, procedures, and actions to be accomplished to meet the incident objectives	
Res.B1a 6.2.1.1	Obtain Incident Commander approval of Incident Action Plan	
ResB1a 7.1.1	Disseminate Incident Action Plan to other response organizations	

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	through operational briefing as appropriate	
ResB1a 7.5.1	Evaluate and revise processes in response to incident developments	
ComC 4.2.3	Report and document the incident by completing and submitting required forms, reports, documentation, and follow-up notations on immediate response communications	

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<b>Objective 8:</b> EM.02.02.03 Resources and Assets	Evaluate the ability of medical and health partners across the response system to request, distribute, track and return medical countermeasure resources in accordance with the EOM, to include allocation of scarce resources.	<b>Sectors using this objective:</b> Emergency Management, MHOAC, Hospitals, Public Health, Mental Health, Dialysis. <b>Sectors NOT using this objective:</b> LEMSA,_Fire, Ambulance, Community Health Centers, Long Term Care, Ambulatory Surgery Centers, Home Health, Hospice
<b>Objective 9:</b> EM.02.02.13 EM.02.02.15 Volunteers	Exercise the activation of the local disaster medical volunteer system.	<b>Sectors using this objective:</b> Emergency Management, MHOAC, Hospitals, Public Health, Mental Health, Dialysis. <b>Sectors NOT using this objective:</b> LEMSA,_Fire, Ambulance, Community Health Centers, Long Term Care, Ambulatory Surgery Centers, Home Health, Hospice
<b>Objective Comments</b>		
These objectives target resource requesting and tracking, and use of local disaster medical volunteer system.		
<b>Capability</b>	Public and Private Services and Resources (Formerly Volunteer Management and Donations)	
<b>Activity</b>	Support and Coordinate Response	
<b>Task</b>	<b>Description</b>	
Res.B1c 8.3.1	Coordinate activation of mutual aid agreements to obtain resources	
Res.B1c 8.3.2	Support incident response operations by providing resources ordered by the Incident Management Team(s) (IMT) or appropriate response entity	
Res.B1a 5.2	Implement processes to order, track, assign and release incident resources	
Res.B1a 4.2.4	Request additional resources as necessary for operations and on-site incident management	

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Res.B1d 3.1.1	Establish communication between EOC and Incident Management Team(s) or appropriate response entity to determine resource needs to support incident response and operations	
Res.C2a 3.1.1	Coordinate distribution of stockpile assets	
Res.B1d 3.2.2	Identify existing internal, jurisdiction-specific resources available to support response and recovery operations	
Res.B1d 4.1	Initiate resource logistics and distribution support for incident response operations according to the Incident Management Team(s) or appropriate response entity assignments in the Incident Action Plan	
Res.B1d 4.3	Implement resource-tracking system	
Res.B1d 5.1	Determine additional human and material resources needed to support response	

Additional Local Health Department Objectives

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**Agency/Organization:** \_\_\_\_\_

<b>Objective 10:</b>	<p>Identify the process for epidemiological surveillance information communication and coordination among Medical Health partners, including:</p> <ul style="list-style-type: none"> <li>• California Department of Public Health (CDPH)</li> <li>• Local Health Department</li> <li>• Hospitals (specifically between infection prevention, and Local Health Department personnel)</li> <li>• Other healthcare facilities</li> </ul>	<p><b><u>Sectors using this objective:</u></b> Public Health Hospitals (select task)</p> <p><b><u>Sectors NOT using this objective:</u></b> LEMSA, Fire, Emergency Management, MHOAC, Ambulance, Community Health Centers, Long Term Care, , Mental Health, Ambulatory Surgery Centers, Home Health, Hospice, Dialysis.</p>
<b>Objective Comments</b>		
Share situational information		
<b>Capability</b>	Public Health and Medical Services (Formerly Epidemiological Surveillance and Investigation)	
<b>Activity</b>	Direct Epidemiological Surveillance and Investigation Operations	
<b>Task</b>	<b>Description</b>	
Pro.B1a 3.3.2	Identify applicable laws, policies, and implementation procedures for public health reporting and notification	
Pro.B1a 3.2.2	Identify all stakeholders and agency representatives or liaisons for public health response	
Res.B1c 5.2.3	Coordinate with non-government agencies and/or private sector to collect/share data on incident situation.	
	Hospitals receive and submit epidemiological information.	

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Additional Local Health Department Objectives

**Agency/Organization:** \_\_\_\_\_

<b>Objective 11:</b>	Test the ability to conduct surveillance and subsequent epidemiological investigations to identify potential exposure and disease.	<p><b>Sectors using this objective:</b> Emergency Management, MHOAC, Fire, Ambulance, Hospitals, Public Health, Dialysis.</p> <p><b>Sectors NOT using this objective:</b> LEMSA, Fire, Ambulance, Community Health Centers, Long Term Care, Mental Health, Ambulatory Surgery Centers, Home Health, Hospice</p>
<b>Objective Comments</b>		
Conduct surveillance and epidemiological investigation for potential exposure or disease		
<b>Capability</b>	Public Health and Medical Services (Formerly Epidemiological Surveillance and Investigation)	
<b>Activity</b>	Direct Epidemiological Surveillance and Investigation Operations	
<b>Task</b>	<b>Description</b>	
Pro.B1a 3.1	Lead public health investigations to determine source of disease in collaboration with law enforcement	
<b>Activity</b>	Surveillance and Detection	
Pro.B1a 4.2.1	Detect suspected outbreak through pattern recognition	
<b>Activity</b>	Conduct Epidemiological Investigation	
Pro.B1a 5.2	Conduct epidemiological investigations to identify potential exposure and disease	
Pro.B1a 5.2.1	Define case characteristics.	
Pro.B1a 5.3.1	Search actively for cases	
Pro.B1a 5.4	Conduct contact tracing	
	Hospitals conduct internal epidemiological investigations and	

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	interventions.	
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Additional Local Health Department Objectives

**Agency/Organization:** \_\_\_\_\_

<b>Objective 12:</b>	Test the ability to implement necessary control measures to stop further cases of illness or disease in accordance with established policies.	<b>Sectors using this objective:</b> Emergency Management, MHOAC, Fire, Ambulance, Hospitals, Long Term Care, Public Health, Mental Health, Dialysis.  <b>Sectors NOT using this objective:</b> LEMSA, Community Health Centers, Ambulatory Surgery Centers, Home Health, Hospice.
EM.02.02.05 Safety and security		
<b>Objective Comments</b>		
Implementing control measures		
<b>Capability</b>	Public Health and Medical Services (Formerly Epidemiological Surveillance and Investigation)	
<b>Activity</b>	Direct Epidemiological Surveillance and Investigation Operations	
<b>Task</b>	<b>Description</b>	
Pro.B1a 3.3.4	Make public health recommendations for prophylaxis and other interventions	
<b>Activity</b>	Conduct Epidemiological Investigation	
Pro.B1a 5.5.1	Recommend control measures for outbreak	
<b>Capability</b>	Isolation and Quarantine	
<b>Activity</b>	Direct Isolation and Quarantine Tactical Operations	
<b>Task</b>	<b>Description</b>	
Res.B3b 3.1.2	Identify applicable isolation and quarantine laws, policies, implementation procedures	

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Additional Local Health Department Objectives

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<b>Objective 13:</b>	Test the ability of the MHOAC Program to consolidate and disseminate the epidemiological surveillance information received within the Operational Area.	<b>Sectors using this objective:</b> MHOAC
		<b>Sectors NOT using this objective:</b> Emergency Management, MHOAC, LEMSA, Fire, Ambulance, <u>Hospitals</u> , Community Health Centers, Long Term Care, Public Health, Mental Health, Ambulatory Surgery Centers, Home Health, Dialysis.
<b>Objective Comments</b>		
This tests the format and process of (1) coordination and information dissemination between Epidemiology and the MHOAC Program in accordance with the California Public Health and Medical Emergency Operations Manual (EOM), and (2) notification and dissemination by the MHOAC Program to public health agency representatives and stakeholders, including non-government agencies and/or the private sector. (Objectives 7 and 13 should be considered separate but critically linked and interdependent functions/capabilities.)		
<b>Capability</b>	Public Health and Medical Services (Formerly Epidemiological Surveillance and Investigation)	
<b>Activity</b>	Direct Epidemiological Surveillance and Investigation Operations	
<b>Task</b>	<b>Description</b>	
Pro.B1a 3.3.2	Identify applicable laws, policies, and implementation procedures for public health reporting and notification	
Pro.B1a 3.2.2	Identify all stakeholders and agency representatives or liaisons for public health response	
Res.B1c 5.2.3	Coordinate with non-government	

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	agencies and/or private sector to collect/share data on incident situation.	
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*The 2014 Statewide Medical and Health Exercise was developed in coordination with the full scale dispensing and distribution exercise in the San Francisco Bay Area.*

*Consider for exercise development:*

- The objectives can be edited to the needs of the exercise participants. Consider education and training, new equipment, policies and procedures, and issues identified in previous after action reports*